ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	R H		715
O.I.P.E. CLASSIFIER	RSD		7/12/01
FORMALITY REVIEW	H.T.	1117	8/16/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
— (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

BEST AVAILABLE COPY

Claim Final	Original	1/17/02	3/5/03	8/21/03	Date
	1	÷	✔	✔	
	2	÷	✔	✔	
	3	÷	✔	✔	
	4	÷	✔	✔	
	5	÷	✔	✔	
	6	÷	✔	✔	
	7	÷	✔	✔	
	8	÷	✔	✔	
	9	÷	✔	✔	
	10	÷	✔	✔	
	11	÷	✔	✔	
	12	÷	✔	✔	
	13	÷	✔	✔	
14	14	÷	N	N	
	15	÷	N		
	16	÷	N		
	17	÷	N		
	18	÷	N		
	19	÷	N		
	20	÷	N		
	21	÷	N		
	22	÷	N		
	23	÷	N	✔	
	24	÷	N	N	
25	25	÷	✔	✔	
	26	÷	✔	✔	
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Claim Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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